

This sheet is not part of and does not count as a sheet of the international application.

PCT

FEE CALCULATION SHEET

Annex to the Request

For receiving Office use only

International Application No.

Date stamp of the receiving Office

Applicant's or agent's file reference

A3013-PCT

Applicant

4 AZA Bioscience nv

CALCULATION OF PRESCRIBED FEES

1. TRANSMITTAL FEE EUR 100,- T

2. SEARCH FEE EUR 1.550,- S

International search to be carried out by EP
(If two or more International Searching Authorities are competent to carry out the international search, indicate the name of the Authority which is chosen to carry out the international search.)

3. INTERNATIONAL FILING FEE

Where items (b) and/or (c) of Box No. IX apply, enter Sub-total number of sheets } 85
Where items (b) and (c) of Box No. IX do not apply, enter Total number of sheets }

i1 first 30 sheets EUR 902,- i1

i2 55 x 10 EUR = EUR 550,- i2
number of sheets in excess of 30 fee per sheet

i3 additional component (only if sequence listing and/or tables related thereto are filed in computer readable form under Section 801(a)(i), or both in that form and on paper, under Section 801(a)(ii):
400 x _____ = _____ i3
fee per sheet

Add amounts entered at i1, i2 and i3 and enter total at I EUR 1.452,- I

(Applicants from certain States are entitled to a reduction of 75% of the international filing fee. Where the applicant is (or all applicants are) so entitled, the total to be entered at I is 25% of the international filing fee.)

4. FEE FOR PRIORITY DOCUMENT (if applicable) P

5. TOTAL FEES PAYABLE EUR 3.102,-
TOTAL

Add amounts entered at T, S, I and P, and enter total in the TOTAL box

MODE OF PAYMENT

- authorization to charge deposit account (see below) postal money order cash coupons
- cheque bank draft revenue stamps other (specify):

AUTHORIZATION TO CHARGE (OR CREDIT) DEPOSIT ACCOUNT

(This mode of payment may not be available at all receiving Offices)

- Authorization to charge the total fees indicated above.
- (This check-box may be marked only if the conditions for deposit accounts of the receiving Office so permit) Authorization to charge any deficiency or credit any overpayment in the total fees indicated above.
- Authorization to charge the fee for priority document.

Receiving Office: RO/ EPO

Deposit Account No.: 28020053

Date: 10 September 2004

Name: Ariane Bird

Signature: 